

Application of Doctor Number  
101632.00

Application of Doctor Number  
101632.00

OR. OTHER THAN  
SMALL ENTITY

**Column 2)**

RATE	FEE
BASIC	2.50
1st 18	72
2nd 84	504
3rd	
TOTAL	\$1,326

\* If the difference in column 1 is less than zero, enter "0" in column 2.

OTHER THAN  
SMALL ENTITIES

16/06/2020 20

2. **உறுப்பினர் 3-**

	DATE	AMOUNT
PAID	50	100.
CASH	200	400.
QTR	380	
CASH	TOTAL	2500.00
	QTR FEE	

**100155**

1186

	DATE	FILE
23	10-10-66	10-10-66
24	10-10-66	10-10-66
25	10-10-66	10-10-66
26	10-10-66	10-10-66
27	10-10-66	10-10-66
28	10-10-66	10-10-66
29	10-10-66	10-10-66
30	10-10-66	10-10-66
31	10-10-66	10-10-66
32	10-10-66	10-10-66
33	10-10-66	10-10-66
34	10-10-66	10-10-66
35	10-10-66	10-10-66
36	10-10-66	10-10-66
37	10-10-66	10-10-66
38	10-10-66	10-10-66
39	10-10-66	10-10-66
40	10-10-66	10-10-66
41	10-10-66	10-10-66
42	10-10-66	10-10-66
43	10-10-66	10-10-66
44	10-10-66	10-10-66
45	10-10-66	10-10-66
46	10-10-66	10-10-66
47	10-10-66	10-10-66
48	10-10-66	10-10-66
49	10-10-66	10-10-66
50	10-10-66	10-10-66
51	10-10-66	10-10-66
52	10-10-66	10-10-66
53	10-10-66	10-10-66
54	10-10-66	10-10-66
55	10-10-66	10-10-66
56	10-10-66	10-10-66
57	10-10-66	10-10-66
58	10-10-66	10-10-66
59	10-10-66	10-10-66
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62	10-10-66	10-10-66
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64	10-10-66	10-10-66
65	10-10-66	10-10-66
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68	10-10-66	10-10-66
69	10-10-66	10-10-66
70	10-10-66	10-10-66
71	10-10-66	10-10-66
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73	10-10-66	10-10-66
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78	10-10-66	10-10-66
79	10-10-66	10-10-66
80	10-10-66	10-10-66
81	10-10-66	10-10-66
82	10-10-66	10-10-66
83	10-10-66	10-10-66
84	10-10-66	10-10-66
85	10-10-66	10-10-66
86	10-10-66	10-10-66
87	10-10-66	10-10-66
88	10-10-66	10-10-66
89	10-10-66	10-10-66
90	10-10-66	10-10-66
91	10-10-66	10-10-66
92	10-10-66	10-10-66
93	10-10-66	10-10-66
94	10-10-66	10-10-66
95	10-10-66	10-10-66
96	10-10-66	10-10-66
97	10-10-66	10-10-66
98	10-10-66	10-10-66
99	10-10-66	10-10-66
100	10-10-66	10-10-66
TOTAL		
ADDITION		

## Scientific

**۱۰. نتیجه گیری:**

	RATE	ADDITIONAL FEE
CR	A 3.00	
CR	X 5.00	
CR	+ 5.00	
CR	TOTAL	
	ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "C" in column 3

\*\* If the Highest Number Previously Paid For THIS SPACE is less than 20, enter "20"

\*\*\* If the "Highest Number Participants Paid For" IN THIS SPACE is less than 2, enter "3".

The "Major Member Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 C.F.R. 1.16. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Substitute for Form PTO-875						Application or Docket Number <div style="font-size: 1.2em; font-family: cursive;">10/632001</div>			
<b>CLAIMS AS FILED - PART I</b>									
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	RATE	FEE		
BASIC FEE (37 CFR 1.16(a))				\$ _____		\$ _____			
TOTAL CLAIMS (37 CFR 1.16(c))				X \$ _____ =		X \$ _____ =			
INDEPENDENT CLAIMS (37 CFR 1.16(b))				X \$ _____ =		X \$ _____ =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =			
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL			
<b>CLAIMS AS AMENDED - PART II</b>									
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))		Minus	**		X \$ _____ =		X \$ _____ =		
Independent (37 CFR 1.16(b))		Minus	***		X \$ _____ =		X \$ _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =			
				TOTAL ADD'L FEE		TOTAL ADD'L FEE			
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))		Minus	**		X \$ _____ =		X \$ _____ =		
Independent (37 CFR 1.16(b))		Minus	***		X \$ _____ =		X \$ _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =			
				TOTAL ADD'L FEE		TOTAL ADD'L FEE			
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))		Minus	**		X \$ _____ =		X \$ _____ =		
Independent (37 CFR 1.16(b))		Minus	***		X \$ _____ =		X \$ _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =			
				TOTAL ADD'L FEE		TOTAL ADD'L FEE			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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